

Clark County Coroner
1704 Pinto Lane
Las Vegas, NV 89106
(702) 455-3210



AUTOPSY REPORT

Case Number: [REDACTED]

October 4, 2017

AUTOPSY REPORT

PATHOLOGIC EXAMINATION ON THE BODY OF

[REDACTED]

DIAGNOSES

1. Complex, Peforating Gunshot Wound of the Right Arm (see injury description).
2. Gunshot Wound of the Right Lateral Chest, Penetrating (see injury description).
3. Right Hemothorax, Chest.
4. Hemoperitoneum, Abdominal Cavity.
5. Pale Internal Organs consistent with Acute Blood Loss.
6. Pulmonary Edema, Bilateral, Lungs.

OPINION

CAUSE OF DEATH: The cause of death of this [REDACTED] year-old [REDACTED] female, [REDACTED] is GUNSHOT WOUND OF THE RIGHT ARM, RIGHT LATERAL CHEST.

MANNER OF DEATH: HOMICIDE.



Larry Simms, DO, MPH (DABP-AP, CP, FP)
Medical Examiner
Clark County, Nevada (Las Vegas)

DATE: Oct 20 2017

LS/kra/amu

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October 4, 2017

POSTMORTEM EXAMINATION ON THE BODY OF [REDACTED]

NOTICE: Forensic, medical and scientific evidence as proof of a fact can establish that fact to an extent varying between slight possibility to certainty. The minimal standard of proof for all conclusions in this report is to a reasonable degree of scientific, medical and forensic certainty; the degree of certainty for any given conclusion in this report can range from this lowest standard of certainty up to beyond a reasonable doubt.

The manner of death is based on the information available at the time of signature.

AUTOPSY: Date of pronounced death is October 1, 2017. The autopsy is performed by Lary Simms, DO, MPH, Medical Examiner, at 1215 hours, October 4, 2017.

CLOTHING: The body is received unclothed. Accompanying the body are brown boots, black socks, jean shorts, and pink underwear.

EXTERNAL EXAMINATION: The body is that of a normally developed White adult. Rigor mortis is absent. Lividity is present posteriorly. The head hair is light and long. The unshaved scalp is unremarkable. The eyes are closed. The corneas are cloudy. The irides are light. The nose, lips and mouth are unremarkable. The teeth are natural and in fair repair. No injuries are identified to the external neck. The anterior chest is unremarkable. The abdomen demonstrates striae. The extremities are equally and symmetrically developed. Fingerprint ink is present on the hands bilaterally. The fingernails and toenails are medium in length and the toenails demonstrate decoration. The external genitalia are female and otherwise unremarkable. The back and buttocks show no evidence of natural disease.

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INVENTORY OF MEDICAL TREATMENT:

1. The right chest demonstrates needle thoracostomy.
2. The right lateral chest demonstrates surgical incision associated with a small bore thoracostomy tube.
3. The left chest demonstrates surgical incision associated with small bore thoracostomy tube.

INVENTORY OF RADIOGRAPHIC FINDINGS:

COMMENT: Digital radiographs are interpreted on an ENTUITIVE monitor; degenerative skeletal change is present; acute medical intervention is present.

1. Postmortem regional radiograph of the head is unremarkable.
2. Postmortem regional radiograph of the chest demonstrates opacification of the right lung field; the thoracic vertebral column demonstrates a convex right scoliosis without vertebral wedging; ballistically significant and insignificant bullet fragments are projected over the right lower chest.
3. Postmortem regional radiographs of the abdomen and pelvis demonstrates ballistically significant and insignificant bullet fragments projected over the right hemi-abdomen.
4. Postmortem regional radiographs of the extremities demonstrates multiple soft tissue defects of the right arm associated with ballistically insignificant bullet fragments; the humerus, radius and ulna show no evidence of injury; the extremities are otherwise unremarkable.

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INVENTORY OF GUNSHOT INJURY:

1. Located on the lateral aspect of the right lower arm is a gunshot wound of entrance measuring 0.22 inch in overall dimension; the wound is composed of a central hole measuring 0.12 inch in dimension and a circumferential abrasion collar measuring up to 0.05 inch in dimension.

The bullet courses through the skin and subcutaneous tissues of the lateral aspect of the right lower arm, courses through the anterior compartment of the right lower arm without causing bony injury and exits in the antecubital fossa; the exit wound measures 2 x 0.6 inch in dimension.

The bullet re-enters the front surface of the distal right lower arm; the re-entry wound measures 1.8 x 1.1 inch in dimension. The bullet courses through the medial soft tissue compartment of the right upper arm without causing bony injury and re-exits on the medial aspect of the right lower arm; the re-exit wound measures 0.90 x 0.60 inch in dimension.

The bullet then re-enters the body through the right lateral chest 15.8 inches from the top of the head in the anterior axillary line; the re-entry wound in the right lateral chest is atypical in appearance measuring 0.85 inch in dimension and is composed of a central hole measuring 0.4 inch in dimension associated with an irregular abrasion collar measuring up to 0.20 inch in dimension and satellite irregular and curvilinear abrasions.

The bullet courses into the right hemidiaphragm through the lateral aspect of the 8th rib, courses through the liver and courses into the vertebral column at L1.

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The thoracolumbar spinal canal is exposed via anterior approach; the membranous compartments of the thoracolumbar spinal canal and the thoracolumbar spinal cord are unremarkable.

A deformed small caliber jacketed hollow point bullet is recovered from the posterior elements of the 1st lumbar vertebra; additional jacket fragments are recovered from the parenchyma of the liver.

The right pleural cavity contains 200 ml of liquid blood; the right upper abdominal cavity contains 400 grams of clot and 100 ml of liquid blood.

The bullet courses through the right arm (as previously described) and re-enters the right lateral chest where it courses from front-to-back, right-to-left and downward. Examination of the wound of entrance on the right arm shows no evidence of close-range firing.

INVENTORY OF ADDITIONAL FINDINGS:

1. The arms bilaterally demonstrate scattered irregular and curvilinear hyperpigmented and hypopigmented areas.
2. The legs bilaterally demonstrate scattered irregular and curvilinear hyperpigmented and hypopigmented areas.
3. The left knee demonstrates an irregular 1 inch abrasion associated with adjacent ecchymosis.

INTERNAL EXAMINATION:

MEASUREMENTS AND WEIGHTS (approximate/estimate only):

Height: 71 inches
Weight: 175 pounds
Heart: 280 grams

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Lungs: 800 grams
Liver: 1650 grams
Spleen: 100 grams
Kidneys: 210 grams
Brain: 1340 grams

BODY CAVITIES: The body is entered by a Y-shaped incision. Except for the findings previously described, the peritoneal surfaces of the body cavities are unremarkable. The internal organs that are present retain their normal anatomic position and relationships.

NECK ORGANS: The tongue shows no external injury and on serial sectioning is unremarkable. The surfaces of the epiglottis show no abnormalities.

The suprathyroid and infrathyroid (strap) muscles of the neck are dissected in layers and show no evidence of antemortem hemorrhage.

The hyoid bone is dissected. The synchondroses of the hyoid bone are partially fused and intact. The greater horns of the hyoid bone show no evidence of fracture or periosteal hemorrhage.

The thyroid cartilage is dissected. The superior horns and laminae show no evidence of fracture or perichondral hemorrhage.

The cricoid cartilage ring is dissected. The cricothyroid membrane shows no evidence of hemorrhage. The cricoid cartilage shows no evidence of fracture or perichondral hemorrhage.

The prevertebral soft tissue and muscles of the cervical vertebral column show no evidence of antemortem hemorrhage. The anterior cervical vertebral column shows no evidence of hemorrhage, fracture or dislocation.

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CARDIOVASCULAR SYSTEM: The aorta and great vessels demonstrate yellow streaking. The coronary arteries have a normal surface course and configuration; the coronary circulation is right dominant. On serial sectioning the left coronary artery system and the right coronary artery system exhibit no significant pathologic changes.

The valves of the heart are unremarkable. The ventricular chambers are unremarkable. On serial sectioning the myocardium displays no focal pathologic changes.

RESPIRATORY SYSTEM: The trachea and major bronchi are unremarkable. The pulmonary vessels are unobstructed. On serial sectioning the pulmonary parenchyma demonstrates generalized edema.

HEPATOBILIARY SYSTEM: Except for the findings previously described, the surface of the liver is unremarkable. On serial sectioning, except for the findings previously described, the hepatic parenchyma is unremarkable. The gallbladder and biliary tract are unremarkable.

HEMOLYMPHATIC SYSTEM: The capsular surface of the spleen is smooth and without adhesions. On serial sectioning the splenic parenchyma is pale and otherwise unremarkable. The internal lymph nodes identified are unremarkable.

GASTROINTESTINAL SYSTEM: The esophagus is unremarkable. Stomach content is 150 ml of gray-brown paste admixed with digesting food particles. The stomach, small bowel and colon are unremarkable. The pancreas has a normal size and on serial sectioning is pale.

GENITOURINARY SYSTEM: The renal surfaces are granular. On serial sectioning the renal cortex is pale and has normal thickness. The calyces, pelvis and ureters are unremarkable.

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The uterus, fallopian tubes and ovaries are present and unremarkable. The endometrium is reduced in size.

ENDOCRINE SYSTEM: The thyroid gland has a normal size and on serial sectioning is pale. The adrenal glands have a normal size and on serial sectioning are pale. The rest of the endocrine system shows no identifiable abnormalities.

CENTRAL NERVOUS SYSTEM: The scalp, subscalp soft tissue and calvaria show no evidence of injury. On entering the cranial cavity the membranous compartments are free of hemorrhage. The leptomeninges and the surfaces of the cerebral hemispheres are unremarkable. The vessels at the base of the brain have a normal configuration. The base of the skull shows no evidence of injury. On serial sectioning the brain is pale and reveals no grossly visible changes of natural disease.

PHYSICAL EVIDENCE RECOVERY AND DISPOSITION:

1. Small caliber deformed partial metal jacket hollow point bullet and jacket fragments recovered from the liver and thoracolumbar vertebral column to custody of Las Vegas Metropolitan Police Department.

FLUIDS AND TISSUES SUBMITTED:

1. Postmortem heart blood.
2. Postmortem chest blood.
3. Vitreous humor.
4. Liver tissue.
5. Bile.
6. Brain tissue.
7. Autopsy tissue to stock.

TESTING ORDERED:

1. Toxicologic analysis [NMS: Basic] on autopsy blood.